10/168,336

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

AMAZON-12ADV

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | |
|---|---|---|--------------|-----------------------------------|--------------|------------------|----------|--------------------|------------------------|-------|----------------------------|-------------------------|
| TOTAL CLAIMS | | | 64 | | | |] [| RATE | FEE |] | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | 1 | BASIC FEE | 385.00 | OR | BASIC FEE | 770.00 |
| TOTAL CHARGEABLE CLAIMS | | | 64 minus 20= | | - 44 | |] . [| XS 9= | | OR | XS18= | 192 |
| <u> </u> | EPENDENT C | | 7 minus 3 = | | 4 | | | X43= | | OR | X86= | 344 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | |] [| +145= | · | OR | ÷290= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | 1906 | |
| 9/8/06 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | <u>)</u> | SMALL | ENTITY | OR | OTHER SMALL I | THAN |
| AMENDMENT A | , | CLAIMS REMAINING AFTER AMENDMENT | | HIGHI NUME PREVIO PAID I | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE. | ADDI- TIONAL FEE, |
| | Total | . 16 | Minus | -6 | 4 | = / |] [| X\$ 9= | | OR | XS18= | |
| | Independent | NTATION OF M | Minus | PENIDENIT | 7 | = / | 4 [| X43= | | OR | X86= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +145= | | OR | +290= | |
| | | | | | | | | TOTAL DDIT. FEE | | OR | TOTAL ADDIT, FEE | |
| | | (Column 1) | | (Colum | nn 2) | (Column 3) | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID F | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | | XS 9= | | OR | X\$18= | |
| | Incependent | NTATION OF MU | Minus | *** | CLAMA | <u> </u> | 4 [| X43= | | OR | X86= | |
| | FIRST PRESE | NIATION OF MC | LIPLE DEP | EMDEMI | CLAIM | <u> </u> | ┚┌ | +145= | | OR | +290= | |
| | | | | | | | A | TOTAL ODIT. FEE | · | OR | TOTAL ADDIT. FEE | |
| _ | | (Column 1) | | (Colum | | (Column 3) | _ | | | _ | | |
| AMENDMENT C | · . | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIO PAID F | IER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = . | IJſ | X\$ 9= | | OR | X\$18= | |
| | Independent | • | Minus | *** | | = . | ┇┞ | X43= | | ۵۵ | X86= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +290= | |
| | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE TOTAL ADDIT. | | | | | | | | | | | |